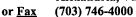


PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

maintenance fee notification	is.				, (-) 3		
	E ADDRESS (Note: Use Block 1 for 11/19/2004	any change of address)		Note: A certificate of Fee(s) Transmittal. T papers. Each addition have its own certification.	of mailing can only be used f his certificate cannot be used nal paper, such as an assignmate of mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must	
JACOBSON HO 400 SEVENTH ST SUITE 600 WASHINGTON, I	REET N.W.	FEB 2 2 200	1098 H	I hereby certify that States Postal Service addressed to the M transmitted to the US	ertificate of Mailing or Tran. this Fee(s) Transmittal is bein with sufficient postage for fit ail Stop ISSUE FEE address SPTO (703) 746-4000, on the	smission g deposited with the United rst class mail in an envelope above, or being facsimile date indicated below.	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DC 20004	.	Ĭ			(Depositor's name)	
	*		13			(Signature)	
		PADEMAR	,			(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR		D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/652,029	08/31/2000	David R		. Machin	P65858US0	4541	
TITLE OF INVENTION: PI	ERFORMANCE EVALUAT	TION THROUGH	BENCHMAR	RKING USING AN ON-LINE	E QUESTIONNAIRE BASED	SYSTEM AND METHOD	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	. ≤685 \$700		\$0	\$683 - \$ 700	02/22/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
PRIETO, BEATRIZ		2142 709-223000		709-223000			
 Change of correspondence address or indication of "Fee Address" (37. CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 JACOBSON HOLMAN PLLC				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	Γ (print or type)			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	low, no assignee of this form is NOT	data will app Ta substitute	ear on the patent. If an assig for filing an assignment.	gnee is identified below, the o	document has been filed for	
(A) NAME OF ASSIGNEE (B)) RESIDENCE: (CITY and STATE OR COUNTRY)			
BenchmarkPor	rtal, Inc.		Orcutt	Orcutt, CALIFORNIA			
Please check the appropriate	assignee category or catego	ries (will not be pri	nted on the p	atent): 🗖 Individual 🖾	Corporation or other private gr	oup entity Government	
4a. The following fee(s) are	enclosed:	4b	. Payment of	Fee(s):			
Issue Fee (700)			A check in the amount of the fee(s) is enclosed.				
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached. (700)				
Advance Order - # of	Copies		The Dire Deposit Acce	ector is hereby authorized by ount Number <u>06-1358</u>	charge the required fee(s), or (enclose an extra c	credit any overpayment, to copy of this form).	
_ 0	(from status indicated above)	_		ALL ENTITY status. See 37 C	•	
The Director of the USPTO		e Fee and Publicat	ion Fee (if an	`	isly paid issue fee to the applic egistered attorney or agent; or t		
Authorized Signature	1/	Columb	Date 22 February 2005				
Typed or printed name	Michael R. Slob	asky	Registration No. 26, 421				

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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